

# TREE CITY USA Application for Recertification

Mail completed application with requested attachments to your state forester no later than December 31.  
The TREE CITY USA award is in recognition of work completed by the community during the calendar year.  
Please provide information for the year ending \_\_\_\_\_.  
(Some states require information in addition to the requested on this application. Check with your state foresters.)

As \_\_\_\_\_ of the community of \_\_\_\_\_  
(Title - Mayor or other city official)

I herewith make application for this community to be officially recertified as a Tree City USA for \_\_\_\_\_, having  
achieved the standards set forth by The National Arbor Day Foundation as noted below. (year)

## Standard 1: A Tree Board or Department

List board members, and meeting dates for the past year; or name of city department and manager.

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## Standard 2: A Community Tree Ordinance

Check One: ☐ Our ordinance as last submitted is unchanged and still in effect.  
☐ Our ordinance has been changed. The new version is attached.

## Standard 3: A Community Forestry Program with an Annual Budget of at Least \$2 Per Capita

Total community forestry expenditures ..... \$ \_\_\_\_\_

Community populations ..... \_\_\_\_\_

Attach annual work plan outlining the work carried out during the past year. Attach breakdown of community forestry expenditures.

## Standard 4: An Arbor Day Observance and Proclamation

Date observance was held \_\_\_\_\_

Attach program of activities and/or news coverage. Attach Arbor Day proclamation.

Signature

Title

Date

Please type or print the following:

### Mayor or equivalent:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### City Forestry Contact:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

NOTE: Application will not be processed without Standard 3 and 4 attachments.

## Certification

(To Be Completed By The State Forester)

\_\_\_\_\_  
(Community)

The above named community has made formal application to this office. I am pleased to advise you that we reviewed the application and have concluded that, based on the information contained herein, said community is eligible to be recertified as a Tree City USA, for the \_\_\_\_\_ calendar year, having in my opinion met the four standards of achievement in urban forestry.

Signed \_\_\_\_\_  
State Forester Date

### Person in State Forester's Office who should receive recognition material:

Name: \_\_\_\_\_ UPS Address: \_\_\_\_\_

Title: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Agency: \_\_\_\_\_ PH #: \_\_\_\_\_ Email: \_\_\_\_\_